



Part 1: Local Educational Agency Information

Name of Local Educational Agency Howard University Middle School for Math & Science Public Charter School	Name of LEA Executive Director (Public Charter Schools Only) Yolande Maquibela
Full Address of Local Educational Agency 405 Howard Place, NW, Washington, DC 20059	Email Address of LEA Executive Director (Public Charter Schools Only) yom@ms-2.org
Main Telephone Number of Local Educational Agency 202-806-7725	Telephone Number of LEA Executive Director (Public Charter Schools Only) 202-806-7845
Name of Primary LEA Contact for Consolidated Application Programs Leslie Boler	Name of Additional LEA Contact for Consolidated Application Programs Shirley Martin
Position Title of Primary LEA Contact for Consolidated Application Programs Executive Assistant to the Executive Director	Position Title of Additional LEA Contact for Consolidated Application Programs Office Manager
Email Address of Primary LEA Contact for Consolidated Application Programs lebole@universitymiddleschool.org	Email Address of Additional LEA Contact for Consolidated Application Programs shirley@universitymiddleschool.org
Telephone Number of Primary LEA Contact for Consolidated Application Programs 202-865-0261	Telephone Number of Additional LEA Contact for Consolidated Application Programs 202-865-0281

Part 2: Programs for Which the LEA is Applying for Funding

Below, input the allocation, provided by the State Education Agency, for each program for which the LEA is applying for funding through this application. Title III, Part A, the LEA is eligible to apply through this application only if the allocation is at least \$10,000. allocations are subject to change according to the applicable federal and state statutes, regulations, and policies.

For
Please note that

LEA Allocation for Title I, Part A	LEA Allocation for Title II, Part A	LEA Allocation for Title III, Part A
\$ 173,082.92	\$ 41,598.63	

Part 3: Schedule for Submission of Reimbursement Requests

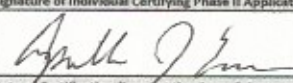
Please indicate, by checking the applicable box below, the schedule that the LEA will follow for Federal Fiscal Year 2012 (July 1, 2012 - September 30, 2014, including the "Tydings" period) for submitting reimbursement requests for all grants included in this application in order to maintain regular drawdowns of federal funds. From among these options, the LEA has the flexibility to choose a schedule that best meets its needs.

Monthly (12 workbooks per year)	Bi-Monthly (6 workbooks per year)	Quarterly (4 workbooks per year)
		X

Part 4: LEA Certification of Application

By signing below, the Applicant certifies that all of the information contained in this application is true and accurate to the best of its knowledge. the Applicant certifies that it has read and agrees to all additional assurances and certifications included in Phase II of the application.

Additionally,

Name of Individual Certifying Phase II Application (Board Chairperson or Chancellor only) Aprilie Ericsson, Ph.D.	Signature of Individual Certifying Phase II Application 
Title of Individual Certifying Phase II Application (Board Chairperson or Chancellor only) Chairperson of the Board of Directors	Date of Certification (input at the time of signature) 10/31/13

SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO CON.APP@DC.GOV.

OSSE Use Only

Date Phase II Application First Received:	
Date Phase II Application Approved (first date for reimbursement):	



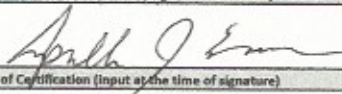
Office of the State Superintendent of Education
DISTRICT OF COLUMBIA

Part 1: Subgrantee Information

Name of Subgrantee Howard University Public Charter Middle School of Mathematics and Science	Name of Subgrantee's Executive Leader (Chancellor, Executive Director, Etc.) Yohance Maqubela
Full Address of Subgrantee 405 Howard Place, NW, Washington, DC 20059	Email Address of Subgrantee's Executive Leader ycm@ms-2.org
Main Telephone Number of Subgrantee 202-806-7725	Telephone Number of Subgrantee's Executive Leader 202-806-7845
Name of Primary Subgrantee Contact for Applicable Grant Program/s Leslie Boler	Name of Additional Subgrantee Contact for Applicable Grant Program/s Shirely Martin
Position Title of Primary Subgrantee Contact for Applicable Grant Program/s Executive Assistant to the Executive Director	Position Title of Additional Subgrantee Contact for Applicable Grant Program/s Office Manager
Email Address of Primary Subgrantee Contact for Applicable Grant Program/s leslie@universitymiddleschool.org	Email Address of Additional Subgrantee Contact for Applicable Grant Program/s shirley@universitymiddleschool.org
Telephone Number of Subgrantee Contact for Applicable Grant Program/s 202-865-0261	Telephone Number of Additional Subgrantee Contact for Applicable Grant Program/s 202-865-0282

Part 2: LEA Certification of Application Amendment Request

By signing below, the Applicant certifies that the application amendment request covers all amendments made to the application (submitted simultaneously).

Name of Individual Certifying Request (for LEAs: Executive Officer of Board or Chancellor only) Aprille Ericson, Ph.D.	Signature of Individual Certifying Amendment Request 
Title of Individual Certifying Request (for LEAs: Executive Officer of Board or Chancellor only) Board Chairperson	Date of Certification (input at the time of signature) 10/31/13